

# BEST AVAILABLE COPY

CLAIMS ONLY							Application Number 10/611,809		Filing Date	
							Applicant(s)			
							* May be used for additional claims or amendments			
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT					
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
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50										
Total Indep	7		7							
Total Depend	6	6								
Total Claims	13		13							